

HEALTH RECORD
07 Mar 2008 1446

CHRONOLOGICAL RECORD OF MEDICAL CARE
Facility: 2nd Medical Group Clinic: PEDIATRIC CLINIC Provider: AZZAWA, BADIA M

Cardiovascular system:

Heart Rate And Rhythm: * Heart rate was normal.
Murmurs: * No murmurs were heard.
Arterial Pulses: * Equal bilaterally and normal.

Abdomen:

Auscultation: * Bowel sounds were normal.
Palpation: * Abdomen was soft. * No abdominal tenderness. * No mass was palpated in the abdomen.
Hepatic Findings: * Liver was not enlarged.
Spleenic Findings: * Spleen was not enlarged.

Rectum:

Anus: * Normal.

Musculoskeletal system:

General/bilateral: * Musculoskeletal system: normal.

Neurological:

Gait And Stance: * Normal.

Skin:

* Color and pigmentation were normal.

Growth and development:

* Shows appropriate behavior at home. * Shows appropriate behavior at school. * Shows appropriate behavior when playing with friends. * Can read and do math at grade level. * Shows pride in achievements. * Can talk about what goes on in school. * Completes school work.

Growth Parameters: * Normal.

Sexual Maturation: * Breast development Tanner stage. * Normal.

Therapy

* Review immunization schedule.

Counseling/Education

- * Discussed use of seat belts
- * Discussed storage of medications
- * Discussed storage of cleaning agents and chemicals
- * Discussed precautions against drowning
- * Discussed avoiding sun exposure
- * Discussed stranger safety
- * Discussed street crossing
- * Discussed what to do if lost
- * Discussed bicycle safety
- * Discussed use of bicycle and motorcycle helmets
- * Discussed sports safety
- * Discussed protective equipment
- * Discussed smoking and drug use in Parents
- * Discussed risk-taking behavior
- * Discussed use of vitamins
- * Discussed food groups
- * Discussed concerns about tooth brushing
- * Discussed concerns about violent behavior / firearm use
- * Discussed role model emulation
- * Discussed sports
- * Discussed clubs

A/P Written by: AZZAWA, BADIA M @ 07 Mar 2008 1521 CDT

1. Preventive Medicine Establ. Patient Checkup Child 5-11

Laboratory(ies): -TSH, SENSITIVE (Routine); CHOLESTEROL TOTAL (Routine)

Patient Instruction(s): -Education And Instructions

-Anticipatory Guidance: Safety Guidelines

-Anticipatory Guidance: Nutrition

-Anticipatory Guidance: General Concerns

-Anticipatory Guidance: Cerebral Stimulation

-Anticipatory Guidance: Activities

2. EYE DISORDERS

Consult(s):

-Referred to: OPHTHALMOLOGY (Routine) Specialty: OPHTHALMOLOGY Clinic; REFERRAL COORDINATOR OFFICE Primary Diagnosis: EYE DISORDERS

Name: PELCH, CHEYENNE B

FMP/SSN: 01/Redacted 0296	Sex: F	Sponsor/SSN: DRIGGERS, JESSICA VIDAURRI/Redacted 0296
DOB: Redacted	Tel H:	Rank: STAFF SERGEANT
PCat: F41 USAF FAM MBR AD	Tel W:	Unit: BB1C FGD
MC Status: TRICARE PRIME (CHAMPUS)	CS:	Outpt Rec. Em. OUTPATIENT RECORDS - WHMC
Insurance: No	SWS:	PCM:
		Tel PCM:

CHRONOLOGICAL RECORD OF MEDICAL CARE

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579) UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED

STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRM (41 CFR) 201-45.505

Page 3 of 4

Defendants
Exhibit Three, in globo

NSN 7540-00-634-4176

600-108

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)			
24 Mar 04	2d MEDICAL GROUP, BARKSDALE AFB LA 71110-2425 PEDIATRIC CLINIC			
1935	HEALTH MAINTENANCE VISIT - 7-8 Year Old			
8 yr	Circle any that apply:			
	Smoker in family	Gun in house	Domestic violence	Alcohol/Drug abuse
	Smoke detector in house	Parent with cholesterol level > 240	Pool at house	
	Parent or grandparent < 55 yrs with heart disease	Pets in home	Contact with anyone with TB	
	Circle any that child does:			
	Visits dentist yearly	Bikes/rollerblades	Has chores at home	Knows address
	Brushes teeth twice daily	Wears sunscreen	Wears seat belt	Wears helmet
	Circle any that your child has had or has:			
3 mch	Positive tuberculosis test	Weight problem	Vision problem	
4 S Nov	Bowel/Bladder problem	Speech problem	Chicken pox	Hearing problem
	List any chronic health problem child has: (Ex: asthma, ear infection, etc.)			
	How many servings per day: Fruits? Vegetables? Milk? Cheese? Yogurt?			
	Does child eat junk food:	Daily?	Weekly? <u>yes</u>	More often?
	How many hours per day does child watch TV/play video games? <u>3 hrs</u>			
	How many hours does child sleep per night?	6	<u>8</u>	10 More
	How does your child do in school?	<u>Excellent</u>	Good	Fair Poor
	List any problems or concerns you would like to discuss?			
Aug 03	wears			
gl arm	AGE 8	WEIGHT <u>25.5 kg 56 1/4 lb</u>	HEIGHT <u>133 1/2 cm, 52 1/2 in</u>	BP <u>95/56</u>
H 81 775	VISUAL ACUITY: R= <u>20/25</u>	L= <u>20/30</u>	BOTH= <u>20/20</u>	
Wt 50 lb	MEDICATIONS: <u>0</u>	ALLERGIES: <u>NKDA</u>		Safety brief <u>SP</u>

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

A22AWC

RECORDS MAINTAINED AT:	BARKSDALE AFB, LA		
PATIENT'S NAME (Last, First, Middle initial)	Velch, Cheyenne		
RELATIONSHIP TO SPONSOR	STATUS	RANK/GRADE	
SPONSOR'S NAME	ORGANIZATION		
DEPT./SERVICE	SSH/IDENTIFICATION NO	DATE OF BIRTH	
	<u>01</u> Redacted <u>0296</u>		

2 MDG OVERPRINT FORM #316/SGOMC
APPROVED BY ECOMS ON 15 FEB 01 AND
REVISED ON 1 NOV 02

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5-84) (EF-V1)
Prescribed by GSA and ICMH
FIRM (41 CFR) 201-45 505 (Per FORM PRO)

CPR

(2)

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)	
1/10/17	IMMUNIZATION: Up-to-date, see DD Form 2766C	Chicken Pox: <input checked="" type="radio"/> Y <input type="radio"/> N Vaccine: <input checked="" type="radio"/> Y <input type="radio"/> N
Heart dig or lip ch	DEVELOPMENT: (Circle all that apply)	
Chn 17	Increasing vocabulary	Understands what is read
o D L C	Tells time	Tells jokes
o Gen	Chores	Interests/Hobbies
o Lur	PHYSICAL EXAM: [x] = normal, [o] = abnormal, [-] = not examined, (normal findings), Comments/Abnormal findings:	
Syst	<input checked="" type="checkbox"/> General (well-developed, well-nourished, no distress, not ill in appearance)	
Neg	<input checked="" type="checkbox"/> Head (normal shape and size; no trauma)	
but	<input checked="" type="checkbox"/> Neurological (motor/sensory intact, CN II-XII intact, alert and oriented for age, = strength, = reflexes)	
MGM	<input checked="" type="checkbox"/> Face (symmetrical, normal appearance)	
o Lur	<input checked="" type="checkbox"/> Ears (tympanic membranes gray, mobile, normal landmarks bilaterally)	
o B p	<input checked="" type="checkbox"/> Eyes (red reflex bilaterally, EOM intact, normal alignment, PERRLA)	
o Lur	<input checked="" type="checkbox"/> Nose (patent, no discharge)	
o B p	<input checked="" type="checkbox"/> Teeth (# of teeth, no caries, normal occlusion)	
o Lur	<input checked="" type="checkbox"/> Oral Cavity (moist pink mucous membranes without lesions or tonsillar hypertrophy)	
o B p	<input checked="" type="checkbox"/> Neck (supple, shotty nodes, full ROM)	
o Lur	<input checked="" type="checkbox"/> Chest (symmetrical, unlabored respirations, clear to auscultation)	
o B p	<input checked="" type="checkbox"/> CV (normal heart sounds, RRR, no murmur, normal pulses and capillary refill)	
o Lur	<input checked="" type="checkbox"/> Abdomen (positive bowel sounds, no masses, no hepatosplenomegaly, nontender, nondistended)	
o B p	<input checked="" type="checkbox"/> Back (straight, no curvature or defects)	
o Lur	<input checked="" type="checkbox"/> Genitalia (female - normal external anatomy, no rash, or discharge)	
o B p	<input checked="" type="checkbox"/> Genitalia (male - normal penis, testicles descended bilaterally, no hernia, no rash; circumcision? <input checked="" type="radio"/> Y <input type="radio"/> N)	
o Lur	<input checked="" type="checkbox"/> Rectal (normal external appearance, no fissures, or rash)	
o B p	<input checked="" type="checkbox"/> Extremities (normal appearance, full ROM of all joints)	
o Lur	<input type="checkbox"/> Skin (no rashes or birthmarks, warm, pink, dry, with good turgor)	
o B p	ASSESSMENT: new kid with school sport	
o Lur	ANTICIPATORY GUIDANCE: (Circle all that apply)	
o B p	Regular exercise	Helmet use
o Lur	Seat belt	Talk about drugs
o B p	Firm/Consistent rules-consequences	Library card
o Lur	Gun/Sport safety	
o B p	PLAN: Immunize per protocol	
o Lur	(Circle all that apply) CBC Cholesterol Lipoprotein Tuberculosis UA Lead	
o B p	PREVENTION: Given and discussed 7-8 year physical Putting Prevention Into Practice Instruction	
o Lur	Handout	
o B p	RTC 8-9 year physical sooner p.r.n.	
o Lur	Dental visit annually	
o B p	Eye exam	
o Lur	PROVIDER SIGNATURE AND STAMP	

NSN 7540-00-63-1-4176

600-108

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE

SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)

HEALTH MAINTENANCE VISIT (2-6 YRS)

TYPE OF PHYSICAL: PRE SCHOOL DAY CARE SCHOOL

CURRENT PROBLEMS OR CONCERNS:

MEDICINES/DRUG ALLERGIES: *NIDA* / *P*

PAST MEDICAL HISTORY:

Y <input checked="" type="checkbox"/> N	Hospitalizations	Y <input checked="" type="checkbox"/> N	Chronic illnesses
Y <input checked="" type="checkbox"/> N	Surgeries	Y <input checked="" type="checkbox"/> N	Asthma
Y <input checked="" type="checkbox"/> N	Fractures/Trauma	Y <input checked="" type="checkbox"/> N	Heart Murmur
Y <input checked="" type="checkbox"/> N	Seizures	Y <input checked="" type="checkbox"/> N	Chickenpox

fragrant for "granite"
Max. Omega. ill
w/ty yes. @ birth allergy.

Explain all yes answers:

FAMILY HISTORY: List medical problems or chronic illnesses in the child's parents, siblings, or grandparents

VISION: RT: 20/20 LT: 20/30 BOTH: 20/20

IMMUNIZATIONS HISTORY: (Circle which shots have been given)

DTaP/DTP	1 2 3 4 5	OPV/IPV	1 2 3 4
HIB	1 2 3 4	MMR	1 2
HEP B	1 2 3	TB-PPD	VARIVAX

DEVELOPMENT:

2 YRS Climbs steps, one at a time Opens doors Kicks a ball Throws overhead
 Stacks 5-6 blocks Two word Phrases At least 20 word vocabulary

Draws circle and line Uses spoon and cup well Washes & dries hands

3 YRS Jump in place Kick ball Pedals trike Opens doors Tower of 9 cubes
 Speech mostly intelligible Speaks in sentences Knows name, age, sex
 Puts on some clothing & shoes Describes action in books

4 YRS Jumps forward Stands one foot 3-5 sec Uses p. rt with good control Counts to 5
 Dresses and undresses self, some help Initiate make-believe/role playing

5 YRS Skip Broad Jump Cut and Paste 4-5 Colors Identify Coins Tell Story
 Dress/undress without help Copies triangles Knows Gender Counts to 10

Self care (toilet) Draws person with 2-4 parts after head Recognizes most letters

6 YRS Prints numbers to 10 Throws and catches Knows right from left Prints Name
 Bounces ball 4-6x Draws person with 6 body parts Skates Rides a bike

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

RECORDS
MAINTAINED
AT:

PATIENT'S NAME (Last, First, Middle initial)

SEX

RELATIONSHIP TO SPONSOR

STATUS

RANK/GRADE

SPONSOR'S NAME

ORGANIZATION

DEPARTMENT/SERVICE

SSN IDENTIFICATION NO.

DATE OF BIRTH

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5-84)

Prescribed by GSA and ICMR

FPMR (41 CFR) 201-46.505

100-108

REVIEWED/APPROVED BY ECOMS ON 19 JUNE 97

(4)

NSN 7540-00-634-4176

600-108

HEALTH RECORD		CHRONOLOGICAL RECORD OF MEDICAL CARE	
DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)		
19 Aug '98	PEDIATRIC CLINIC BARKSDALE AFB, LA EAR INFECTION FOLLOW - UP FORM		
	Allergies:	wt:	temp:
	Chief Complaint:		
	SUBJECTIVE:		
	PMH: Ear infection # in the last months Prior ENT evaluation Y / N Audiology Y / N		
	MEDs: Completed / days of on		
	Other MEDs being taken:		
	Ear Symptoms: Fever Pain Drainage Fullness Hearing Problems Asymptomatic		
	URI Symptoms: Cough Congestion Runny Nose Other		
	Bottle propping Family History of Ear infections Day Care Attendance Smoking in the home		
	OBJECTIVE:		
	Tympanic Membranes:		
	Right: gray, pink, red, other Not visualized		
	Light reflex - present / absent, dull, air / fluid level, landmarks visible / obscured		
	mobile, decreased mobility, immobile		
	Tympanic Membranes:		
	Left: gray, pink, red, other Not visualized		
	Light reflex - present / absent, dull, air / fluid level, landmarks visible / obscured		
	mobile, decreased mobility, immobile		
	Other:		
	ASSESSMENT:		
	Resolved	AOM	SOM bilat R L
	PLAN:		
	MEDs		
	RTC: 2 weeks/sooner p.r.n. 1 month p.r.n.		
	Referrals: ENT Audiology Speech and Hearing		

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

1115 Ear Inf. FU
Lee, Pat R

RECORDS MAINTAINED AT:		PATIENT'S NAME (Last, First, Middle Initial)		SEX
		Polch, Cheyenne B		F
RELATIONSHIP TO SPONSOR		STATUS	RANK/GRADE	
D/D		AD	Amn	
SPONSOR'S NAME		ORGANIZATION		
Polch, Jessica V				
DEPART./SERVICE	SSN IDENTIFICATION NO.	DATE OF BIRTH		
AF	011 Redacted D242	Redacted		

ZMG OVERPRINTED FORM #121/SGOBO
APPROVED BY ECOMS ON 19 FEB 98

CHRONOLOGICAL RECORD OF MEDICAL CARE

STANDARD FORM 600 (REV. 5-84)
Prescribed by GSA and ICMR
FIRM (41 CFR) 201-45.505

(EF-VII)
(Use FORM FRO)

5

Medical Record
 DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

Driggers, Cheyenne B

Table Of Contents

Table Of Contents	2
Demographics	6
Allergies	7
Nka	7
Nkda	7
Problems	8
Active Problems	8
MENORRHAGIA PUBERTAL on 27 Jul 2013	8
Contraceptives on 24 Jun 2013	8
Outpatient Physician Consultation on 11 Feb 2013	8
Feeling tired or poorly on 17 Apr 2012	8
URTICARIA on 14 Feb 2012	8
Patient activity at time of event - softball on 03 Mar 2011	8
Abnormal menses on 29 Nov 2010	9
URINARY TRACT INFECTION on 29 Nov 2010	9
OTHER visit for: administrative purpose on 23 Mar 2010	9
Visit for: screening exam for malignant neoplasm cervix on 16 Feb 2010	9
Oral Contraceptives on 16 Feb 2010	9
METRORRHAGIA on 02 Feb 2010	9
Visit for: refer patient without exam or treatment on 10 Sep 2009	10
EYE DISORDERS on 07 Mar 2008	10
FRACTURE OF RADIUS / ULNA CLOSED on 09 Oct 2007	10
STRABISMUS on 04 Oct 2007	10
Preventive Medicine Establ. Patient Checkup Child 5-11 on 04 Oct 2007	10
Inactive Problems	10
PHARYNGITIS STREPTOCOCCUS, GROUP A: BETA HEMOLYTIC on 16 Jan 2014	11
WARTS PLANTAR on 03 Sep 2013	11
[REDACTED]	11
Visit for: student physical on 24 Jun 2013	11
PHARYNGITIS ACUTE on 20 Sep 2011	11
CLOSED FRACTURE 2ND FINGER PROXIMAL PHALANX RIGHT HAND on 22 Feb 2011	11
Visit for: examination for sports competition on 19 Jan 2011	12
PHARYNGITIS on 26 Jan 2010	12
Visit for: administrative purpose on 28 Apr 2009	12
[REDACTED]	12
Visit for: issue medical certificate on 16 Apr 2009	12
CLOSED FRACTURE RADIUS/ULNA DISTAL END on 09 Oct 2007	12
Need For Vaccination Chickenpox (Active) on 04 Oct 2007	12
Vaccines Prophylactic Need Against Viral Diseases on 04 Oct 2007	13
Vaccine needed prophylactically against bacterial diseases on 04 Oct 2007	13
Vaccines Prophylactic Need Against Td on 04 Oct 2007	13
Medications	14
Active Medications	14
Discontinued Medications	14
Expired Medications	14
Procedures	16
Family History	19
family medical history on 08 Aug 2014	19
no family history of sudden early deaths on 04 Aug 2012	19
no family history of genetic disease on 04 Aug 2012	19
no family history of mental illness (not retardation) on 04 Aug 2012	19
no family history of ischemic heart disease before age 50 on 04 Aug 2012	19

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED

Page 2

6

Medical Record
Driggers, Cheyenne B DOB: *Redacted* SSN: ***-**-0629 Created: 20 Aug 2014

MEDICAL RECORD
For
Driggers, Cheyenne B

From: 15 Jan 1996 To: 20 Aug 2014
Operator: MARSHALL, EVELYN M
Created On 20 Aug 2014 09:23:02
at 2d Medical Group Barksdale AFB, LA

Driggers, Cheyenne B DOB: *Redacted* SSN: ***-**-0629 Created: 20 Aug 2014
THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579) UNAUTHORIZED ACCESS TO THIS
INFORMATION IS A VIOLATION OF FEDERAL LAW. VIOLATORS WILL BE PROSECUTED. Page 1

7

		Medical Record
Driggers, Cheyenne B	DOB: Redacted	SSN: ***-**-0629 Created: 20 Aug 2014
no family history of hypertrophic cardiomyopathy on 04 Aug 2012.....	19	
no family history of obesity on 04 Aug 2012.....	19	
no family history of familial hypercholesterolemia on 04 Aug 2012	20	
no family history of long QT syndrome on 04 Aug 2012.....	20	
no family history of diabetes mellitus on 04 Aug 2012	20	
no family history of hypertension on 22 Jul 2011.....	20	
no family history of kidney disease on 06 Dec 2010	20	
family health status was reviewed on 06 Dec 2010	20	
no family history of malignant carcinoma of the breast on 16 Feb 2010.....	20	
no family history of malignant neoplasm of the ovary on 16 Feb 2010	21	
no family history of malignant neoplasm of the uterus on 16 Feb 2010.....	21	
no family history of malignant neoplasm of the large intestine on 16 Feb 2010	21	
family history of heart disease on 16 Feb 2010	21	
no family history of stroke syndrome on 16 Feb 2010	21	
family history of hypertension on 07 Mar 2008.....	21	
no family history of asthma on 07 Mar 2008.....	21	
no family history of alcoholism on 07 Mar 2008.....	22	
family history of diabetes mellitus on 07 Mar 2008	22	
family history of not using drugs on 07 Mar 2008.....	22	
family history of not a current smoker on 07 Mar 2008	22	
family history of hyperlipidemia on 07 Mar 2008	22	
no family history of hyperlipidemia on 04 Oct 2007	22	
Resulted Labs.....	23	
[REDACTED].....	23	
[REDACTED].....	23	
[REDACTED].....	23	
Throat Culture on 20 Sep 2011	24	
Streptococcus Group A Ag Rapid on 20 Sep 2011	24	
Urine Culture on 29 Nov 2010	25	
Urinalysis W/Reflex Microscopic+ Culture on 29 Nov 2010	25	
Specific Gravity Manual on 29 Nov 2010	26	
Microscopic Urine on 29 Nov 2010.....	26	
[REDACTED].....	26	
[REDACTED].....	27	
Cytology, Gyn on 16 Feb 2010	27	
Throat Culture on 26 Jan 2010.....	28	
Infectious Mononucleosis Screen on 26 Jan 2010	29	
Streptococcus Group A Ag Rapid on 26 Jan 2010.....	29	
[REDACTED].....	30	
[REDACTED].....	30	
Thyroid Stimulating Hormone Sensitive on 07 Mar 2008.....	30	
Cholesterol on 07 Mar 2008.....	31	
Throat Culture on 23 Feb 2005	31	
Streptococcus Group A Ag Rapid on 23 Feb 2005.....	32	
Radiology.....	33	
Right Hand Series Report on 22 Feb 2011.....	33	
Left Forearm Series Report on 19 Nov 2007	33	
Left Wrist Series Report on 19 Nov 2007.....	34	
Left Elbow Series Report on 09 Oct 2007	35	
Left Wrist Series Report on 09 Oct 2007.....	35	
Left Forearm Series Report on 09 Oct 2007	36	
Chest PA And Lateral Upright Series Report on 23 Feb 2005	37	
Immunizations.....	38	
Previous Encounters.....	39	
12 Aug 2014 at 2nd Medical Group, 2nd Medical Group Family Health Clinic Peacemaker by VANARSDALL		
DONNA	39	

8

Medical Record

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

06 Aug 2014 at 2nd Medical Group, FSO by MARKS, FREDRIC ABEL.....	41
08 Jul 2014 at 2nd Medical Group, FSO by SHANKS, LINDSEY KATHLEEN.....	43
04 Apr 2014 at 2nd Medical Group, FSO by BAIRD, JENNIFER A.....	44
16 Jan 2014 at 2nd Medical Group, FSO by MATNEY, LINDSAY M.....	45
12 Nov 2013 at 2nd Medical Group, FSO by BETANCOURT, TINA A.....	48
07 Nov 2013 at 2nd Medical Group, FSO by DAVILA, JENNA ELIZABETH.....	49
29 Oct 2013 at 2nd Medical Group, FSO by MATNEY, LINDSAY M.....	50
03 Sep 2013 at 2nd Medical Group, FSO by MATNEY, LINDSAY M.....	53
09 Aug 2013 at 2nd Medical Group, FSO by SIMPSON, PAUL B.....	55
06 Aug 2013 at 2nd Medical Group, FSO by SHANKS, LINDSEY KATHLEEN.....	56
01 Aug 2013 at 2nd Medical Group, 2nd Medical Group Family Health Clinic Deuce by WALKER, CAROL D.....	58
27 Jul 2013 at 2nd Medical Group, Barksdale Pediatric Team A by ILCUS, LIDIA S.....	59
23 Jul 2013 at 2nd Medical Group, FSO by PRAKASH, DAVE CHARAN.....	61
10 Jul 2013 at 2nd Medical Group, FSO by MATNEY, LINDSAY M.....	62
20 Jun 2013 at 2nd Medical Group, FSO by MATNEY, LINDSAY M.....	63
14 May 2013 at 2nd Medical Group, FSO by PRAKASH, DAVE CHARAN.....	66
13 May 2013 at 2nd Medical Group, FSO by SIMPSON, PAUL B.....	67
11 Feb 2013 at 2nd Medical Group, FSO by JANES, FRANCIS E.....	68
30 Jan 2013 at 2nd Medical Group, FSO by SIMPSON, PAUL B.....	69
04 Aug 2012 at 2nd Medical Group, Barksdale Pediatric Team A by MCDONALD, BARBARA HELEN.....	70
17 Apr 2012 at 2nd Medical Group, FSO by SIMPSON, PAUL B.....	74
14 Feb 2012 at 2nd Medical Group, 2 Medical Group Family Health Center Floater by STRICKLIN, ERIC ALIC.....	75
20 Sep 2011 at 2nd Medical Group, FSO by JANES, FRANCIS E.....	78
20 Jul 2011 at 2nd Medical Group, Pediatric Clinic by BERGANIO, SUSAN Y.....	81
22 Feb 2011 at 2nd Medical Group, FSO by ST PIERRE, MARY JANE.....	85
19 Jan 2011 at 2nd Medical Group, FSO by ST PIERRE, MARY JANE.....	90
29 Nov 2010 at 2nd Medical Group, FSO by ST PIERRE, MARY JANE.....	93
16 Mar 2010 at 2nd Medical Group, Blue Team Clinic by WEAVER, DANIEL C.....	95
16 Feb 2010 at 2nd Medical Group, Gyn Clinic by OVERTON, TIAMEKO ROCHELLE.....	97
02 Feb 2010 at 2nd Medical Group, FSO by OWEN, RORY G.....	100
26 Jan 2010 at 2nd Medical Group, FSO by OWEN, RORY G.....	103
10 Sep 2009 at 2nd Medical Group, Silver Team Clinic by BARAJAZ, GEORGE A.....	106
28 Apr 2009 at 2nd Medical Group, Silver Team Clinic by DECASTRO, JUSTINE DE.....	107
15 Apr 2009 at 2nd Medical Group, FSO by BLUBAUGH, STEPHANIE A.....	108
07 Mar 2008 at 2nd Medical Group, Pediatric Clinic by AZZAWF, BADIA M.....	111
26 Nov 2007 at 2nd Medical Group, Orthopedic Clinic by HOSPODAR, STEVEN J.....	115
16 Oct 2007 at 2nd Medical Group, Orthopedic Clinic by HOSPODAR, STEVEN J.....	117
09 Oct 2007 at 2nd Medical Group, Orthopedic Clinic by SPEARS, LOREACE J.....	119
09 Oct 2007 at 2nd Medical Group, Pediatric Clinic by SANDERS, LOIS K.....	121
04 Oct 2007 at 2nd Medical Group, Pediatric Clinic by AZZAWF, BADIA M.....	123
Clinical Notes.....	126
12 Nov 2013 1154 at 2nd Medical Group, 2nd Medical Group by COX, REGINA.....	126
07 Nov 2013 1236 at 2nd Medical Group, 2nd Medical Group by JONES, CESSILY ANN.....	129
07 Nov 2013 1225 at . by P.....	134
28 Aug 2013 1237 at . by.....	135
23 Jul 2013 0845 at 2nd Medical Group, 2nd Medical Group by JONES, CESSILY ANN.....	136
14 May 2013 1058 at 2nd Medical Group, 2nd Medical Group by JOHNSON, CORRESHA F.....	141
14 May 2013 1055 at 2nd Medical Group, 2nd Medical Group by JOHNSON, CORRESHA F.....	145
14 May 2013 1052 at . by.....	148
11 Feb 2013 0921 at . by.....	149
11 Feb 2013 0919 at 2nd Medical Group, 2nd Medical Group by BELL-COOPER, CAROL A.....	150
11 Feb 2013 0918 at 2nd Medical Group, 2nd Medical Group by BELL-COOPER, CAROL A.....	154
13 Mar 2010 0938 at . by.....	158
16 Feb 2010 1500 at . by.....	161

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW. VIOLATORS WILL BE PROSECUTED.

Page 4

9

Medical Record

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

Verified:	Yes	CPT:	00091
Source:	Unknown Source of Info	Status:	Active
Comment:			

CAST, SHORT ARM CAST, PEDIATRIC (0-10 YEARS), FIBERGLASS

Date Performed:	Unknown	Date Reported:	22 Oct 2007
Clinician:			
Verified:	Yes	CPT:	04012
Source:		Status:	Active
Comment:			

Orthopedic Casting Short Arm

Date Performed:	Unknown	Date Reported:	16 Oct 2007
Clinician:			
Verified:	Yes	CPT:	29075
Source:		Status:	Active
Comment:			

SLINGS

Date Performed:	Unknown	Date Reported:	09 Oct 2007
Clinician:			
Verified:	Yes	CPT:	84565
Source:		Status:	Active
Comment:			

Splinting Wrist Static

Date Performed:	Unknown	Date Reported:	09 Oct 2007
Clinician:			
Verified:	Yes	CPT:	26125
Source:		Status:	Active
Comment:			

Vaccines Viral Varicella (Active)

Date Performed:	Unknown	Date Reported:	04 Oct 2007
Clinician:			
Verified:	Yes	CPT:	90716
Source:		Status:	Active
Comment:			

Human Papilloma Virus Vaccine, Quadrivalent

Date Performed:	Unknown	Date Reported:	04 Oct 2007
Clinician:			
Verified:	Yes	CPT:	90649
Source:		Status:	Active
Comment:			

Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED

Page 17

(10)

Medical Record
 Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

Name	Value	Units	Range	Abnormal
on 16 Feb 2010				
Collection Date:	16 Feb 2010		Specimen:	URINE
Ordering Clinician:	OVERTON, TIAMEKO R		Site:	Unknown
Comment:				
Name	Value	Units	Range	Abnormal
			(see note)	(L*)
Interpretation:				

Cytology, Gyn on 16 Feb 2010

Collection Date: 16 Feb 2010 Specimen: LBC CERVICAL (WITH REFLEX HPV)
 Ordering Clinician: OVERTON, TIAMEKO R Site: Unknown
 Comment:

Procedure: CYTOLOGIC GYN

Order #: 100216-01235
 Provider: OVERTON, TIAMEKO R
 Ordered Date: 20100216144300
 Priority: ROUTINE
 Specimen: LBC CERVICAL (WITH REFLEX HPV)
 Result Date: 20100223083129.1-0600
 100217 WTC 218 16Feb10 THIN PREP-CEL(LBC CERVICAL)

Medical Record

Driggers, Cheyenne B

DOB: Redacted

SSN: ***-**-0629

Created: 20 Aug 2014

Col: OVERTON, TIAMEKO R Req Loc: GYN CLIN
Hcp: 59TH MEDICAL WING
Performing Lab: 100219 CG 17621
PL Accession(s): KDF23Feb10@0831
CYTO GYN C: AP Report
100219 CG 17621 Col: 16Feb10@0001 THIN PREP-CE(UNKNOWN)
Hcp: OVERTON, TIAMEKO ROCHELLE Req Loc: REMOTE L
SL Accession #: 100217 WHC 218
CYTO GYN C: JK23Feb10@0719
CoPath Report
Patient: DRIGGERS, CHEYENNE B Specimen #: CG10-17621
Accessioned: 02/19/10
Pathologist: Cytotech: Grace Flores, Civ, DAF
SOURCE OF SPECIMEN: LBC CERVICAL (WITH REFLEX HPV) (CERV W REFLEX)
Smears Received: 1
Post-Menopausal: No
CLINICAL DIAGNOSIS AND HISTORY: Hysterectomy: No
Birth Control Pills: No
I.U.D.: No
Hormone Therapy: No
FINAL DIAGNOSIS: SATISFACTORY FOR EVALUATION, ENDOCERVICAL COMPONENT SEEN.
NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY.
Cervical/Vaginal cytology is a screening test primarily for squamous cancers and precursors and has associated false-negative and false-positive results.
New technologies such as liquid-based preparations may decrease but will not eliminate all false-negative results. Regular sampling and follow-up of unexplained clinical signs and symptoms are recommended to minimize false negative results.
REFERENCE: SOLOMON, NAYAR. The Bethesda System for Reporting Cervical Cytology. Definitions, Criteria, and Explanatory Notes. 2nd edition. 2004.
This ThinPrep pap test was reviewed by the ThinPrep Imaging System. Grace Flores, Civ, DAF ** Report Electronically Signed **
jkj/02/23/10
Joel Kay, Jr., GS-11, SCT(ASCP)
; 88175 ; CG: CYTOPATH CERV-VAG THIN LAYER SCREEN MAN
RESCREEN WITH PHYS
CPT Codes: SUPERVISION
SNOMED CODES
I. E3345; M09450; T83000; T83300

Throat Culture on 26 Jan 2010

Collection Date: 26 Jan 2010
Ordering Clinician: OWEN, RORY G
Comment:

Specimen: Pharynx
Site: Unknown

Throat Culture

Driggers, Cheyenne B

DOB: Redacted

SSN: ***-**-0629

Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED.

Page 28

Medical Record

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

06 Aug 2014 at 2nd Medical Group, FSO by MARKS, FREDRIC ABEL

Encounter ID: BARK-996728

Primary Dx: DEPRESSION

Patient: DRIGGERS, CHEYENNE B
 Treatment Facility: 2ND MEDICAL
 GROUP
 Patient Status: Outpatient

Date: 06 Aug 2014 0939 CDT
 Clinic: FLIGHT SURGEONS OFFICE

Appt Type: T-CON*
 Provider: MARKS, FREDRIC A

Call Back Phone: (318)-741-0243

AutoCites Refreshed by SHANKS, LINDSEY KATHLEEN @ 06 Aug 2014 0940 CDT

Allergies
 •No Known Allergies

Reason for Telephone Consult: Written by SHANKS, LINDSEY KATHLEEN @ 06 Aug 2014 0939 CDTQuestionnaire AutoCites Refreshed by SHANKS, LINDSEY KATHLEEN @ 06 Aug 2014 0940 CDT
QuestionnairesS/O Note Written by SHANKS, LINDSEY KATHLEEN @ 06 Aug 2014 0941 CDTHistory of present illness

The Patient is an 18 year old female.

S/O Note Written by MARKS, FREDRIC A @ 08 Aug 2014 1430 CDTSubjective

18 year old female having trouble coping with life stressors/parents' pending divorce. Denies SI/HI.

A/P Last updated by MARKS, FREDRIC ABEL @ 08 Aug 2014 1431 CDT

1. DEPRESSION 311: - Received request from technician to speak with pt, states she is on the phone with anxiety and wanting to be seen. Call transferred to nurse.

- Pt verified by name & dob

- Pt states her parents are in the middle of a divorce and there is an OSI investigation going on.

- States she is supposed to leave for college next week.

- Pt reports c/o anxiety and depression, states she can't eat or sleep. States she hasn't eaten in 2 days.

- Asked pt if she has had any thoughts of hurting herself or anyone else?

- Pt answered, "well I have had times when I thought life would be better without me, but I wouldn't do anything." Pt denies having any plans to hurt herself.

- Next available appt is 20 Aug 14.

- Recommend pt be evaluated asap and see counselor.

- Pt states OSI has set her up with a counselor for next week.

- Discussed with Col Marks who recommended pt see BHOP nurse; if she thinks pt needs to start medication or has other recommendations, to have pt come to FSO after seeing BHOP nurse and he will see pt.

- Notified BHOP nurse of above. She agrees with poc and states she will see pt as walk-in.

- Pt states she is currently in Haughton, she is going to eat something as she has not eaten in 2 days, she will then come directly to Med Group. Advised pt to check in at FHC, to see BHOP nurse. Pt will then see Col Marks in FSO afterwards as needed.

Disposition Last updated by MARKS, FREDRIC ABEL @ 08 Aug 2014 1430 CDT

Follow up: with PCM and/or in the FLIGHT SURGEONS OFFICE clinic. - Comments:

PT VERIFIED BY NAME & DOB

NOT PRP

NOT DEPLOYMENT RELATED

NOT ON FLIGHT STATUS

Discussed: Diagnosis, Medication(s)/Treatment(s) with Patient who indicated understanding.

Driggers, Cheyenne B

DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS
 INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED.

Page 41

(14)

Medical Record
 Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

04 Oct 2007 at 2nd Medical Group, Pediatric Clinic by AZZAWA, BADIA M

Encounter ID: 49964672 Primary Dx: Preventive Medicine Establ. Patient
 Checkup Child 5-11

Patient: DRIGGERS, CHEYENNE B Date: 04 Oct 2007 1420 CDT Appt Type: WELL
 Treatment Facility: 2ND MEDICAL Clinic: PEDIATRIC CLINIC Provider: AZZAWA, BADIA M
 GROUP
 Patient Status: Outpatient

Reason for Appointment: physical
 Appointment Comments:
 mlw

AutoCites Refreshed by BOOTHE, AMY H @ 04 Oct 2007 1442 CDT
 Problems
 No Problems Found.

Allergies
 • No Known Allergies

Active Medications
 No Active Medications Found.

Screening Written by BOOTHE, AMY H @ 04 Oct 2007 1443 CDT

Allergen information verified by BOOTHE, AMY H @ 04 Oct 2007 1443 CDT
 Reason(s) For Visit (Chief Complaint): visit for: 11-12 year visit V21.2 (New) : child is 11 years:

Vitals

Vitals Written by BOOTHE, AMY H @ 04 Oct 2007 1443 CDT
 BP: 110/73, HR: 78, HT: 63.5 in, WT: 40 kg, Uncorr OS: 20/70, Uncorr OD: 20/30, Uncorr OU: 20/25, BMI: 15.38, BSA: 1.373
 square meters, Tobacco Use: No, Alcohol Use: No, Pain Scale: 0 Pain Free
 Comments: Medications Reviewed
 Percentiles
 WT= 50%
 HT= 97%

Questionnaire AutoCites Refreshed by BOOTHE, AMY H @ 04 Oct 2007 1442 CDT

Questionnaires
 No Questionnaires Found.

SO Note Written by AZZAWA, BADIA M @ 04 Oct 2007 1450 CDT

Chief complaint

The Chief Complaint is: Well Child Visit.

History of present illness

The Patient is a 11 year old female.
 • Past medical history reviewed.
 • Shows appropriate behavior at home * Shows appropriate behavior at school * Shows appropriate behavior when playing
 with friends * Can read and do math at grade level * Shows pride in achievements * Can talk about what goes on in school *
 Completes school work

* Visit is not deployment-related
 Symptoms, Complaints, or Concerns: lazy eye since birth

Allergies

No allergies

Past medical/surgical history

Reported History:

Reported medications: Medication history none.

Medical: No previous hospitalizations and no previous emergency room visit. Past medical history was reported by the patient
 none.

Diagnosis History:

No asthma

Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS
 INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED. Page 123

22

Medical Record
 DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

Driggers, Cheyenne B

No attention-deficit / hyperactivity disorder
Personal history
 Social history reviewed.

Habits: Exercising regularly.
 Family: Child cared for at home.
Family history

No cancer
 No heart disease
 No early deaths
 Family history reviewed
 Not smoking
 Hypertension
 No hyperlipidemia
 No diabetes mellitus.

Review of systems

Additional Review of Systems: none.
 Systemic symptoms: No fever.
 Otolaryngeal symptoms: No earache, no nasal discharge, and no nasal passage blockage.
 Pulmonary symptoms: No cough and no wheezing.
 Gastrointestinal symptoms: Appetite not decreased. No vomiting, no abdominal pain, no diarrhea, and no constipation.
 Genitourinary symptoms: No dysuria.
 Endocrine symptoms: Denied concerns about sexual development.
 Skin symptoms: No rash.
 Musculoskeletal symptoms: No arthralgias.
 Psychological symptoms: Good school performance and no problems with one's peer group.

Physical findings

Vital signs:

* Current vital signs reviewed.

General appearance:

* Alert. * Well nourished. * Well hydrated. * Healthy appearing.

Head:

* No evidence of a head injury. * Normocephalic.

Eyes:

General/bilateral:

Extraocular Movements: * Normal.
 Pupils: * Reactive to light.
 External Eye: * Showed no abnormalities.
 Sclera: * Normal.

Ears:

General/bilateral:

External Auditory Canal: * External auditory meatus normal.
 Tympanic Membrane: * Normal.
 Hearing: * No hearing loss noted.

Pharynx:

Oropharynx: * Normal.

Neck:

* Demonstrated no decrease in suppleness. * No cervical mass was seen.

Lymph Nodes:

* Cervical lymph nodes were not enlarged.

Chest:

* Visual inspection revealed no abnormalities.

Lungs:

* Clear to auscultation.

Cardiovascular system:

Heart Rate And Rhythm: * Heart rate was normal.
 Murmurs: * No murmurs were heard.
 Arterial Pulses: * Equal bilaterally and normal.

Abdomen:

Auscultation: * Bowel sounds were normal.
 Palpation: * Abdomen was soft. * No abdominal tenderness. * No mass was palpated in the abdomen.
 Hepatic Findings: * Liver was not enlarged.
 Splenic Findings: * Spleen was not enlarged.

Genitalia:

External: * Genitalia showed no abnormalities.
 Vagina: * Mucosa was normal. * No vaginal discharge was observed

Rectum:

Anus: * Normal.

Skin:

* Color and pigmentation were normal

Musculoskeletal system:

Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED.

Page 124

23

Medical Record
 Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

14 yo female here with family for OSC evaluation. Denies any significant medical problems. Was having sxs of metorrhagia last year according to record. Was referred to WHC for OCP consideration.
 General overall feeling -Very Good

Pain Severity 0/ 10.

Allergies

Current Allergies Reviewed: NONE.

Past medical/surgical history

Reported History:

Medical: Reported medical history No significant medical problems.

Surgical / procedural: Surgical / procedural history None.

Reported medications: Medication history: (X) No Medications

(NA) Current Medications Reviewed and Reconciled

() Vitamins () Dietary Supplements

() Herbals () Weight Loss Meds.

Personal history

Behavioral history: Never smoked / Never Used Tobacco Products.

Alcohol: No consumption of alcohol.

Review of systems

Systemic symptoms: No recent weight loss.

Eye symptoms: No blurry vision.

Otolaryngeal symptoms: No hearing loss.

Cardiovascular symptoms: No palpitations.

Pulmonary symptoms: No dyspnea.

Gastrointestinal symptoms: No heartburn.

Genitourinary symptoms: No change in urinary frequency [REDACTED]

Musculoskeletal symptoms: No muscle aches.

Neurological symptoms: No limb weakness.

Psychological symptoms: No depression and not thinking about suicide. No homicidal thoughts.

Physical findings

General:

Physical examination mobile, moves all extremities without noted limitation.

General appearance:

Normal. Well developed. Well nourished. In no acute distress.

Psychiatric Exam:

Mood: Euthymic.

Affect: Normal.

A/P Written by WEAVER, DANIEL C @ 23 Mar 2010 0832 CDT

1. OTHER visit for: administrative purpose: Reviewed medical records/interviewed patient. No conditions identified that would preclude overseas travel for this family member (although other FMs with significant medical issues).

DD 2792 and AF 1466 accomplished.

Disposition Written by WEAVER, DANIEL C @ 23 Mar 2010 0832 CDT

Released w/o Limitations

Follow up: as needed with PCM.

Discussed: - Comments: Discussed OSC process and timelines.

20 minutes face-to-face/floor time..

Note Written by BROWN, TIFFANY V @ 16 Mar 2010 0829 CDT

Consult Order

Referring Provider: WEAVER, DANIEL C

Date of Request: 11 Mar 2010

Priority: Routine

Driggers, Cheyenne B DOB: Redacted SSN: ***-**-0629 Created: 20 Aug 2014

THIS INFORMATION IS PROTECTED BY THE PRIVACY ACT OF 1974 (PL-93-579). UNAUTHORIZED ACCESS TO THIS INFORMATION IS A VIOLATION OF FEDERAL LAW VIOLATORS WILL BE PROSECUTED

Page 159

(24)

NSN 7540-00-834-4176

600-108

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT TREATING ORGANIZATION (Sign each entry)	
	FAMILY PRACTICE CLINIC TELEPHONE CONSULT	
PROVIDER:	Who is calling? Pelch, Jessica	Age of patient? 23 months
	Problem: Pt has some redness in her vagina area. She is having pain on urination and took 30 minutes to go. & fever	
PCM TEAM:	PN/U	
	When did it start? yesterday	
	What have you done for it?	
	Current Meds (including OTC meds):	
	Allergies:	
	Signature/Print last name: Tony Nelson	TONY J. NELSON, LT, USAF, BSC Physician Assistant 470.90.0103 426
	Is PRP reporting required: YES/NO	
	IF YES, WHAT IMPAIRMENT IS EXPECTED?	
	TYPE OF MEDICATION:	DURATION:
	UNIT/DP:	PERSON NOTIFIED:
	SIGNATURE OF PERSON MAKING NOTIFICATION:	
	Provider Response: Pt on leave in San Antonio. She is fine taken to Wilford Hall she will call her mother	

PATIENT'S IDENTIFICATION (Use this space for Mechanical Imprint)

Home Phone:

Work Phone:

Best time to be reached:

RECORDS MAINTAINED AT:			
PATIENT'S NAME (Last, First, Middle Initial)		SEX	
Pelch Cheyenne			
RELATIONSHIP TO SPONSOR	STATUS	RANK/GRADE	
SPONSOR'S NAME		ORGANIZATION	
DEPART./SERVICE	SSN/IDENTITY ACTION NO.	DATE OF BIRTH	
	01/ Redacted	0-276	

CHRONOLOGICAL RECORD OF MEDICAL

STANDARD FORM 600 (REV. 5-84) (EF-Y11)
Prescribed by GSA and ICMR (PwFORM PRO)
FIRM (41 CFR) 201-45.505

(25)



From: Health Care Information Line To: Ms Hcf Barksdale (328) Fax

Patient Name: CHEYENNE PELCH

Call Date/Time: 12/26/97 4:52 pm

Highest Assessment Category: URGENT WITHIN 24 HOURS: urinary tract problems: 7 weeks - 12 years

Sponsor Information

Sponsor Name: Jessica Pelch

Sponsor SSN: *Redacted* 0296

Sponsor Status: Active

Call Information

Why Calling: what to do

Symptom: Painful urination

When: X24 h

Location: urinary tract

Severity: cries c urination

Comments: Upgraded U4/patient screams on urination and sx have been present already X24 h

Patient Information

Name: CHEYENNE PELCH

Address: 3273 Cottonwood St

SSN:

Birthdate: 1/15/96

Gender:

Bossier City, LA 71111

Home Phone: *Redacted*

Emergency Phone:

Relationship to Caller:

Patient Status: prime - hmo option within tricore

Caller Information

Name: JESSICA PELCH

Home Phone: *Redacted*

Service Referrals

ms hcf barksdale (328) fax

Guideline Text

GUIDELINE: urinary tract problems: 7 weeks - 12 years CATEGORY: homecare & safety

- AG 1. If able to void, drink plenty of fluids, especially water and clear liquids.
- AG 2. Avoid carbonated drinks that tend to make urine alkaline.
- AG 3. Increase juices high in vitamin C, i.e., orange and cranberry to increase acidity, as age appropriate.
- AG 4. Encourage warm baths to ease discomfort.
- AG 5. Reassure child that it is okay to urinate in tub.
- AG 6. Check with physician to see if a follow-up visit or urine test is needed to verify that infection is cleared.
- AG -- May be given acetaminophen, if over 3 mos and not allergic. Acetaminophen is not recommended for newborns through 3 months without physician approval.